

**Department of Insurance and Securities Regulation (DISR)**  
***P.O. Box 92180***  
***Washington, DC 20090***

**Consumer and Professional Services Division (CPSD)**

**APPLICATION FOR RENEWAL OF LICENSE  
FOR FIRMS**

Complete this form and mail it to the address listed above to renew your license. The renewal will not be complete until all required documents are received.

<b>LICENSE DETAILS</b>			
<b>State License Number</b>	<b>Expiration Date</b>	<b>FEIN</b>	
<b>Firm Name</b>			
<b>FEE CALCULATION AND LICENSE RENEWAL</b>			
License Fees are indicated below. The renewal will be rejected if the payment is less than required. No fee is required to cancel your license.			
<b>Amount Due</b>	<b>Late Fee</b> if received after 4/30/2003	<b>Total Amount</b> if received before 4/30/2003	<b>Total Amount</b> if received after 4/30/2003
<b>License Type</b>	<b>Lines of Authority</b>	<b>Do you wish to renew or cancel your license?</b>	
<b>Renewal Fee Payment Information</b>			
<input type="checkbox"/> <b>Money Order #</b> _____			
<input type="checkbox"/> <b>Check #</b> _____ payable to <b>DC Treasurer</b>			

## BACKGROUND INFORMATION – Required for all Applicants

Read each question carefully and choose the appropriate response. Remember to enclose the appropriate documentation where indicated according to each question.

1. Has the business entity or any owner, partner, officer or director ever been convicted of, or is the business entity or any owner, partner, officer or director currently charged with, committing a crime, whether or not adjudication was withheld since you last applied for a license?

☐ YES ☐ NO

“Crime” includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses. “Convicted” includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.

If you answer yes, you must attach to the application

- a) A written statement explaining the circumstances of each incident,
- b) A copy of the charging document, and
- c) A copy of the official document which demonstrates the resolution of the charges or any final judgment.

2. Has the business entity or any owner, partner, officer or director ever been involved in an administrative proceeding regarding any professional or occupational license since you last applied for a license?

☐ YES ☐ NO

“Involved” means having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, placed on probation or surrendering a license to resolve an administrative action. “Involved” also means being named as a party to an administrative or arbitration proceeding which is related to a professional or occupational license. “Involved” also means having a license application denied or the act of withdrawing an application to avoid a denial. You may exclude terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a) a written statement identifying the type of license and explaining the circumstances of each incident,
- b) a copy of the Notice of Hearing or other document that states the charges and allegations, and
- c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

3. Has any demand been made or judgment rendered against the business entity or any owner, partner, officer or director for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding since you last applied for a license?

☐ YES ☐ NO

If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment.

4. Has the business entity or any owner, partner, officer or director ever been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement since you last applied for a license?

☐ YES ☐ NO

If you answer yes, identify the jurisdiction(s): \_\_\_\_\_

5. Is the business entity or any owner, partner, officer or director a party to, or ever been found liable in any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty since you last applied for a license?

☐ YES ☐ NO

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident,
- b) a copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, and
- c) a copy of the official document which demonstrates the resolution of the charges or any final judgment.

6. Has the business entity or any owner, partner, officer or director ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct since you last applied for a license?

☐ YES ☐ NO

If you answer yes, you must attach to this application:

- a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license, and
- b) copies of all relevant documents.

### CERTIFICATION AND ATTESTATION

The undersigned owner, partner, officer or director of the business entity hereby certifies, under penalty of perjury, that:

1. All of the information submitted in this application and attachments is true and complete and I am aware that submitting false information or omitting pertinent or material information in connection with this application is grounds for license or registration revocation and may subject me and the business entity to civil or criminal penalties.
2. Where required by law, the business entity hereby designates the Commissioner, Director or Superintendent of Insurance, or an appropriate representative in each jurisdiction for which this application is made to be its agent for service of process regarding all insurance matters in the respective jurisdiction and agree that service upon the Commissioner or Director of that jurisdiction is of the same legal force and validity as personal service upon the business entity.
3. The business entity grants permission to the Commissioner or Director of Insurance in each jurisdiction for which this application is made to verify any information supplied with any federal, state or local government agency, current or former employer or insurance company.
4. Every owner, partner, officer or director of the business entity either a) does not have a current child-support obligation, or b) has a child-support obligation and is currently in compliance with that obligation.
5. I authorize the jurisdictions to give any information they may have concerning me to any federal, state or municipal agency, or any other organization and I release the jurisdictions and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
6. I acknowledge that I am familiar with the insurance laws and regulations of the jurisdictions to which I am applying for licensure/registration.
7. If required, I have received a Certificate of Good Standing from the jurisdiction's Secretary of State in which I am applying.

Please sign and date here:

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

### ATTACHMENTS

**Non Residents – attach certificate of authority from your home state.**

**Fee: Attach a certified check, check or money order for the amount as indicated below:**

- |  |                   |
|--|-------------------|
| <b>1. Any one (1) or all three (3); Life, Accident/Health or Sickness, Variables</b> | <b>- \$100.00</b> |
| <b>2. Any one (1) or all three (3), Property, Casualty, Personal Lines</b>           | <b>- \$100.00</b> |
| <b>3. Managing General Agent</b>   | <b>- \$300.00</b> |
| <b>4. Reinsurance Intermediary</b>   | <b>- \$300.00</b> |